

CONFIDENTIAL SEXUALLY TRANSMITTED DISEASE CASE REPORT

Report STDs within 3 work days (WAC 246-101-101/301) by faxing page 1 of this report to 206-744-5622.										
			PA	ATIENT INF	ORMATION	l				
LAST NAME FIR:			FIRS	RST NAME, MID INITIAL				EMAIL ADDRESS		
ADDRESS CIT			CITY	TY/TOWN STATE				ZIP		
TELEPHONE ()		DAT MO		TE OF DIAGNOSIS		YI	R	REASON FOR STD EXAM (Check one) Symptomatic		
DATE OF BIRTH		SEX		GENDER O	F SEX PARTI	NERS		☐ Routine Exam – No Symptoms ☐ Exposed to Infection		
MO DAY ETHNICITY	YR RACE (Chor	Male Fem	ale	☐ Male ☐	Female	Both	Unknown	HIV TESTED at VISIT?*		
Hispanic Non-Hispanic Unknown	panic White Asian -Hispanic Black Other			☐ Unknown ☐ American Indian/Alaskan Native lander				Yes No Previous Positive *If newly HIV positive, complete and submit the HIV/AIDS case report		
			D	IAGNOSIS	- DISEASE			·		
DIAGNOSIS - ♥ only one Asymptomatic Symptomatic-Uncomplicated Pelvic Inflammatory Disease Ophthalmia Disseminated		GONORRHEA (lab conf SITE(S) - ✓ all that apply Cervix Vagina Urethra		TREATMENT - ✓ all prescribed ☐ Ceftriaxone ☐ Cefixime ☐ Doxycycline ☐ Azithromycin ☐ Levofloxacin* ☐ Ciprofloxacin* ☐ Cefpodoxime* ☐ Other			SYPHILIS Primary (Chancre, etc.) Secondary (Rash, etc.) Early Latent (<1 yr) Late Latent (>1 yr) Late Symptomatic Congenital Neurosyphillis Yes No			
Other Complications: DATE TESTED:		Rectum Pharynx Ocular Other:		DAT *Not	Other: DATE RX: *Not recommended			DATE TESTED: RX GIVEN: DATE RX:		
		YDIA TRACHOM						HERPES SIMPLEX		
DIAGNOSIS - ✓ only one ☐ Asymptomatic ☐ Symptomatic-Uncomplicated ☐ Pelvic Inflammatory Disease ☐ Ophthalmia ☐ Other Complications: DATE TESTED:		SITE(S) - ✓ all that apply ☐ Cervix ☐ Vagina ☐ Rectum ☐ Urethra ☐ Pharynx ☐ Urine ☐ Ocular ☐ Other:			TREATMENT - ✓ all prescribed Azithromycin		rthromycin oxacin	Genital (initial infection only) Neonatal Laboratory Confirmation Yes No OTHER Chancroid Granuloma Inguinale Lymphogranuloma Venereum		
	PARTNE	R MANAGEMEN	T PL	AN ✓ Selec	ct method o	f ensur	ing partne	r treatment		
PARTNER MANAGEMENT PLAN ✓ Select method of ensuring partner treatment 1. □ Provider will ensure all partners treated (FREE medications available). Indicate number to be treated () 2. □ All partners have been treated. Indicate number treated () 3. □ Health Department to assume responsibility for partner treatment. Health Department assistance recommended if: • Patient has had 2 or more sex partners in the last 60 days, or • Patient does not think he/she will have sex again with sex partners from the last 60 days, or • Patient is unable or unwilling to contact one or more partner, or • Patient is a man who has sex with other men. Note: You can provide partner treatment for one or more partners (free meds available) even if you would like Public Health assistance If providing partner treatment, indicate number of partners treated ().										
	REPORTING CLINIC INFORMATION									
DATE				DIAGNOSING CLINICIAN						
FACILITY NAME			PERSON COMPLETING FORM							
ADDRESS				TELEPHONE						
CITY STATE			FAX #							

Thank you for reporting an STD. All information will be managed with the strictest confidentiality.

PARTNER MANAGEMENT PLAN INSTRUCTIONS

Gonorrhea or Chlamydial Infection: Partner Treatment

All partners should be treated as if they are infected.

If the provider takes responsibility to ensure partner treatment, the provider should examine and or treat all patient's sex partners from the previous 60 days.

If this is **not** possible, patients should be offered medication to give to as many of their sex partners as they are able to contact and/or should be referred to the Public Health - Seattle & King County STD Program for partner notification assistance.

To obtain FREE medication for your patient's partner(s), call or fax a prescription to a participating pharmacy in your area.

For a prescription form and a list of participating pharmacies, visit

http://www.kingcounty.gov/healthservices/health/communicable/std/providers/pharmacies.

Only participating pharmacies have stocks of FREE Public Health medication to dispense to patients for their partner(s).

Public Health may also provide free medication to your patient to give to his or her partner(s).

Public Health recommends that you refer patients with any one or more of the following risks to the health department for help notifying their partners:

- Patient with 2 or more sex partners in the last 60 days, or
- Patient does not think he/she will have sex again with sex partners from the last 60 days, or
- Patient is unable/unwilling to contact one or more partner(s), or
- Patient is a man who has sex with other men.

Although Public Health requests that you refer patients with these risks to us, we also ask that you make every effort to help patients with these risks assure that their partners are treated, either by seeing the partners yourself or by offering patients free medication to give to their partners.

Complete the partner management plan on the Confidential Sexually Transmitted Disease Case Report FAX form to define a partner management plan.

If a case report is not received by Public Health within 30 days of diagnosis, Public Health will not attempt to contact partners.

For a copy of this report, visit http://www.kingcounty.gov/healthservices/health/communicable/providers/reporting.aspx. For additional assistance, call (206) 744-3954.

Other STDs: Partner Treatment

All patients with infectious syphilis, chancroid, LGV or granuloma inguinale are routinely contacted by Public Health. Patients diagnosed with genital herpes should be advised to notify their sex partners and should be informed that their partners should contact their provider for testing.

RECOMMENDED REGIMENS FOR ANTIMICROBIALS LISTED ON CASE REPORTS**

Gonorrhea ((uncompl	licated):
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Alternatives:

OR

Azithromycin (Penicillin allergic)......2g PO as a single dose (additional chlamydia therapy not needed)

Health care providers should no longer use fluroquinolones (Levofloxacin or Ciprofloxacin) as first line therapy due to increased prevalence of quinolone-resistant *Neisseria gonorrhoeae* (QRNG).

Chlamydia Trachomatis (uncomplicated):

Erythromycin...... (base 500 mg PO QID for 7 days, OR

Syphilis (primary, secondary or early latent < 1 year)

Benzathine penacillin G......2.4 million units IM in a single dose

Syphilis (latent > 1 year, latent of unknown duration, tertiary [not neurosyphilis])

Benzathine penicillin G......2.4 million units IM for 3 doses at 1 week intervals

**Refer to "STD Diagnostic and Treatment Guidelines" or CDC website: www.cdc/gov/std/treatment for further information on treating pregnant patients, infections of the pharynx, treatment of infants and other details.